



Gina McNeely, R.S.
Director of Public Health

MONTAGUE BOARD OF HEALTH

One Avenue A • Turners Falls, MA 01376

Phone 413-863-3200 Ext. 205 ■ Fax 413-863-3225

Temporary Food Event Quiz

Answers may be found in the “Are you ready?” handout.

Return completed quiz to the Board of Health with application **14 days BEFORE** the event.

Today's Date: _____

Establishment Name: _____

Name Of Person In Charge During The Event: _____

Event Name: _____ Event Date (s): _____

Food Storage

1. All food equipment, _____ and single service items shall be stored above the floor on _____ or shelving, and protected from contamination.

Hot Storage

2. Hot food storage units shall be used where necessary to keep potentially hazardous foods at **74° F or above**.

True or False

Wet Storage

3. Wet storage of canned or bottled non-potentially hazardous beverages is acceptable when the water contains at least _____ PPM of available chlorine and the water is changed frequently to keep the water clean.

Food Preparation

4. All cooking and serving areas shall be protected from _____. BBQ areas shall be roped off or otherwise segregated from the public.

Thermometers

5. Each refrigeration unit or cooler shall have a numerically scaled thermometer to accurately measure the air temperature of the unit. A metal stem thermometer shall be provided where necessary to check the internal temperatures of both hot and cold food. Thermometers must be accurate to $\pm 2^{\circ}\text{F}$, and have a minimum range of _____ $^{\circ}\text{F}$ and _____ $^{\circ}\text{F}$.

Health

6. Employees shall not have any open cuts or sores or diseases transmittable by food. Employees experiencing vomiting and/or diarrhea, **within a week** of the event, shall not have contact with the food.

True or False

Hygiene

7. Employees shall have clean outer garments and _____. Tobacco usage and eating is not permitted by food employees in the food preparation and service area.

Wastewater

8. Wastewater shall be disposed of in an approved wastewater disposal system. An adequate number of covered containers labeled _____ shall be required in the booth.

Trash

9. An adequate number of _____ containers shall be required _____ and _____ the booth.

Applications

10. Are due _____ before the event to the Montague Board of Health.

Thank you for your time and effort. I am looking forward to a safe, successful event.